



Abandoned Tank Community Assistance Program

State Form 49493 (8-99)

Indiana Department of Environmental Management
Office of Land Quality



APPLICATION

Community:	Co-Applicant:
Contact Person:	Phone #: FAX #:
Address:	County:
Population of community where site located:	
Location of property for which assistance is sought:	
Legal Description:	
Number of tanks on the property:	
Previous property owner(s) (list name(s) and current address if known):	
Please identify the owner who installed the tanks:	
Community obtained ownership of this property through: <input type="checkbox"/> Tax Delinquency <input type="checkbox"/> Lien <input type="checkbox"/> Condemnation <input type="checkbox"/> Other (Please explain)	
Current status of property Is the property abandoned? <input type="checkbox"/> Yes <input type="checkbox"/> No How many years has it been abandoned? If in use, for what purpose? (Please explain)	
What were the tanks used for? (i.e. gas station):	
List any known spills, releases, fires and/or other problems at this site:	

Have any environmental evaluations been conducted on this property? If so, please attach the appropriate data.

Discuss the future intended use of this property, potential for sale and/or redevelopment:

Community factors (What impact is there currently to nearby residences or businesses? If this site is selected for assistance, what will the future impacts be?):

Proposed community reciprocal project:

The applicant does hereby attest and certify that the information included in this assistance application is, to the best of their knowledge and belief, complete and accurate.

By: _____ Date: _____

Signature & Title of person authorized to bind this political subdivision

For IDEM use only:

Net Assessed Value per Capita _____

TANF Poverty Rate Indicator _____